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Statistical Brief

Prepared by the State Center for Health Statistics



For the Council on Health Policy Information

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HEALTH AND THE ELDERLY IN NORTH CAROLINA – Differences Between Whites and Minorities

Two population groups of special concern to health care reform are “racial and/or ethnic minorities” and “the frail or vulnerable elderly.”¹ Thus, for the state’s older minorities, the monitoring of health status, health care access, and the quality of health care is important.

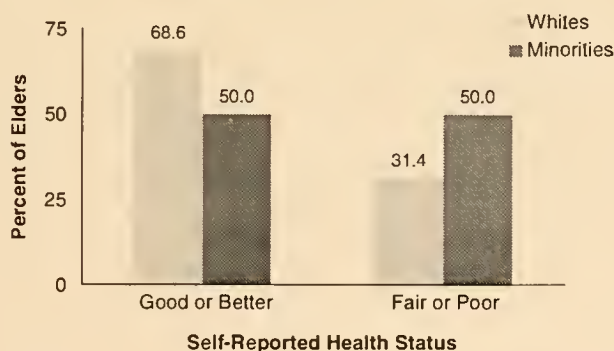
The data of this Brief are from the North Carolina Health Profile (NCHP) telephone survey conducted during the Fall of 1995. The NCHP was funded by The Robert Wood Johnson Foundation. Readers should be aware that all statistics are subject to the usual limitations of telephone sampling and respondent classification errors.

Data presented here are for the state’s noninstitutionalized population 65 years of age and older. The total sample size is 509.

Health Status

- Asked to rate their health on a 5-point scale of poor to excellent, more minority elders than white elders said “fair” or “poor” (Figure 1). Nearly 1 in 4 minorities compared to only 1 in 10 whites said “poor.”

Figure 1
More minority elders than white elders report their health as fair or poor



- Thirty-five percent of minority elders versus 25 percent of white elders said it was difficult to do certain activities such as work or housework because of their health.
- Minority elders (14%) were more likely than white elders (9%) to report a major health problem during the past year.
- Among those reporting a major health problem of their own or a related household member, financial hardship resulting from the problem(s) was reported by 45 percent of minority elders versus 29 percent of white elders.

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